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| APPLICATION NO. | FILING DATE | FIRST NAMED IN | | D INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/061,379 | 02/01/2002 | Atsuk | | Inoue | 47835/DMC/F179 | 2407 | |
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| EXAMINER | | ART UNIT | | CLASS-SU BCLASS | <u> </u> | | |
| CHANG, DANIEL D | | 2819 | | 326-095000 | | | |
| Change of correspondence address or indication of "Fee Address" (CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identifier recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 01 FC:1501 02 FC:1504 03 FC:8001 | | | | | | e document has been filed 0000020 10061379 1330.00 0F 300.00 0F | |
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